

*Report of a Meeting of the Cancer Commission
of Harvard University, in Aid of a Hospital
for Incurable Cases of Cancer*

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THE CANCER COMMISSION OF
HARVARD UNIVERSITY

FOUNDED BY CAROLINE BREWER CROFT

JUNE 16, 1899

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REPORT OF A MEETING OF
THE CANCER COMMISSION
OF
HARVARD UNIVERSITY
IN AID OF A HOSPITAL FOR
INCURABLE CASES OF
CANCER



WEDNESDAY, APRIL 13
1910

THE MEDICAL SCHOOL
HARVARD UNIVERSITY

\$
100000. —

It is estimated that \$50,000 will be a sufficient sum to build the Hospital and that about \$20,000 a year will be required to support it. Contributions are earnestly solicited in aid of this work and may be sent to Dr. J. Collins Warren, Treasurer, in care of the Old Colony Trust Co., Boston.

REPORT OF A MEETING OF THE CANCER
COMMISSION OF HARVARD UNIVERSITY



The Chairman, Dr. J. COLLINS WARREN, opened the meeting as follows:

LADIES AND GENTLEMEN: We have asked you to come here this afternoon to hear something about the work in which the Harvard Cancer Commission is engaged. And first I would make a brief statement in regard to its history. It is indebted to the generosity of a Boston lady, Mrs. Caroline Brewer Croft, the daughter of the late Gardiner Brewer, who gave \$100,000, the income of which was to be devoted to the study of the disease which we are considering to-day. We felt that it was important that we should first take up the scientific side of the study, inquiring into the cause and nature of cancer. We started our work here in the Medical School rather than in the hospitals, and devoted ourselves principally to studies in the laboratory; using our funds as salaries for the payment of investigators who were qualified to make a microscopic and experimental study of the question. At the same time, occasionally we attempted to inquire into certain clinical features of the dis-

ease as they developed incidentally from time to time in some one of the different hospitals. During this period, which is now ten years, we have been working along these lines principally, and have issued five biennial reports. Although we have not been able to discover the actual cause of the disease, as has been the case in many other diseases recently under investigation, we have got to this point in the course of study,—that, so far as we can see, the disease is not due to a germ; that it is due to some organic action of the cells of the body, by which they accumulate in enormous numbers and become a parasitic organism, a germ-like organism, which preys upon the body from the original site from which the disease was developed. By using mice for this purpose (a mouse becomes old at the age of two), we are able to determine a good many interesting questions, showing that certain breeds of mice are susceptible to disease, while others are not. And finally, we have found that the principle of vaccination can in certain cases be applied to tumors. That is, taking one mouse in which a tumor is growing, and inoculating him with another tumor of the same strain, the original tumor has disappeared while the

transferred portion has failed to grow. In other words, we have used that small fragment as a vaccine; by some peculiar action of its own it has stimulated the antagonistic properties of the body, which were acting to a certain extent already against the original tumor, so that they act more strongly, and the tumor has actually disappeared. Now that point was brought out a year ago in our Report which has recently been distributed; and that turned our thoughts, of course, immediately towards the question of treatment. We felt that the time had arrived when we ought to take up this part of our inquiry, and we were considering the question of employing an official to keep us in touch with the hospital clinics, when, as you all know, a case occurred of spontaneous cure of cancer in New York. That is not an unknown thing. Physicians and pathologists are familiar with such isolated cases. In this case the patient had a peculiar dropsical affection by means of which a fluid was obtained. It was necessary to withdraw this fluid for the purpose of relieving the patient; and then it occurred to the physicians in charge that the presence of this fluid might have some connection with the disappearance of the tu-

mors which were spread about in different parts of the body; and so they thought if they introduced that into the tissue of other patients afflicted in the same way, their tumors might disappear; and it has been found that in many cases the tumors are affected, as in the case of the mice to which I have just referred.

This has emphasized the importance of the necessity of turning our thoughts to the clinical side of the question. It seems as if the critical moment had arrived when we must take up that side of the question much more actively. Meanwhile, we have been training scientific men in our laboratories, who have become experts in the work to which we have referred. We wish now to place these experts in intimate contact with living cancer in human beings. Naturally, under those circumstances, we shall have conditions not obtained before. It is only the surgeon and the physician who have been in contact with the cancer patient; but the time has now come when the Commission feels that it would be most important and advantageous for them to have a small hospital on these grounds, in close proximity to the laboratories and under the control of the Commission.

It might be asked if, among all the hospitals that are going up, it would not be perfectly easy to obtain permission from the trustees for accommodations for the patients in some of their wards. The answer is that we want to have this little hospital entirely under our own control, independent of any other organization, so that we can study the cases to the greatest possible advantage; and if we work out some new problem of treatment we shall be in a position to be of service to them. Another answer is that such patients are not taken into the hospitals. The trustees are not inclined to take incurable cases. In the "Good Samaritan" there are no such cases, nor in the Channing Home—I might multiply instances of such hospitals at this time. So that we should be offering a home to a class which has none now; and we should be offering opportunities for special treatment which might be gladly availed of by people who are perhaps unable to provide it for themselves.

ADDRESS
BY PROFESSOR W. T. COUNCILMAN

A TUMOR is a new formation or growth of tissue which resembles to a greater or less degree certain of the tissues of the body. Like the tissues of the body it is composed of cells with a variable amount of material between the cells which is called intercellular substance. The cells of a tumor, representing as they do that part which is more directly concerned with its life, deserve special consideration, and it will be necessary to say a word about cells in general. In all living things we find that cells constitute the living units. The simplest forms of both vegetable and animal life are composed of single cells which derive their nutrition from the fluids around them. Living cells vary greatly in size; some are so small as to be just visible with the highest powers of the microscope, others can be seen with the unaided eye. All have certain features in common, membrane on the outside through which the exchange of material between the cell and the surrounding medium takes place, and an interior mass of granular material, called protoplasm, in which there lies a special structure called the nucleus. In the higher animals similar kinds

of cells with intercellular substance are united to form the tissues of the body, such as muscle, tendon, nerve, epithelium, &c., and several of these tissues are united to form organs such as the liver, the brain, &c. The entire body is composed of organs and tissues, each of which performs some function or act which in some way contributes to the support of the body as a whole.

Although in its structure a tumor may in a general way resemble some part of the body, on close examination there are marked differences. We are accustomed to say that its structure differs from the type of normal structure. These differences are shown in the cells themselves, in their arrangement, and in the character of the material between them. Cells as a rule are more abundant in tumors, there is more variation in size and shape, and the blood supply is more abundant, as compared with the normal tissues. The most marked difference between the tumors and the normal tissues is seen in the growth. The most complicated animal structure begins as an egg, which is but a single cell. This enlarges and after a time divides, and this process is indefinitely repeated. In the course of development certain cells or groups of cells become differ-

entiated from the mass to form the organs and tissues of the body. Growth is at first extremely rapid; it becomes slower and slower, and when the body and organs reach a size corresponding to the type of the species, growth ceases. Not only do the entire body and the organs conform to the general type of the species, but the organs conform to the type of the individual; a large individual has a correspondingly large heart and liver, and a small individual correspondingly small organs. There always remains, however, a capacity for growth which is limited to the degree sufficient for repair. If we remove a small part from an organ or abrade the surface of the body, the surrounding tissue grows until the defect is made good, but not further. In the normal development and growth of the body the growth is regulated; by what means we do not know, but there is reason to believe that the regulation is effected directly or indirectly by the action of certain organs or tissues.

In the tumor, on the other hand, there is no regulation, no limitation, of growth. It begins by the appearance in a part of a mass of cells which may differ little or not at all from the cells around it. These cells grow at times rapidly, at others slowly,

but continuously and without limit. Growth ceases only with the death of the individual who bears the tumor. The capacity for growth resides in the individual cells which compose the tumor. If these be carried from the original site of the tumor by means of the blood or lymphatic vessels into some other part of the body, similar tumors will develop from them. As an instance of the extraordinary capacity for tumor growth certain tumors which appear spontaneously in mice may be transferred to other mice by inoculation. In the mice, inoculated by placing cells of the tumor beneath the skin, a tumor developed which in two weeks reached a size sufficiently large to provide material for the inoculation of eight or ten mice. It must be remembered that all these new growths represent the original spontaneous tumor, the inoculated mice merely serving to provide nourishment for the cells. It has been estimated that in two years, if all the possibilities of growth were availed of by means of repeated inoculations, a mass of tissue several times the diameter of the sun would be produced. It is similar to the geometrical multiplication of the single grain of wheat on the squares on the chess-board.

An old classification divides the tumors into those which are benign and those which are malignant. Strictly speaking, no tumor is benign; any can lead to the death of the bearer. Certain tumors, however, grow slowly; they tend to form a circumscribed mass and do not grow into the surrounding tissues. They can usually be removed completely, and do not tend to recur. These tumors are as a rule compact in their structure; the cells are so closely united with the material about them that they are not easily separated. The malignant tumors, on the other hand, are composed chiefly of cells. They are not compact, but tend to grow into the tissues about them; they infiltrate as the roots of plants penetrate the soil. The cells are loosely attached in the mass; they are easily separated and carried into other parts of the body where they form similar structures.

Tumors may appear in any part of the body; some are dangerous chiefly from their situation, as in the brain. Others, as certain sorts of tumors in the subcutaneous tissue, may remain an indefinite time, producing only inconvenience to the bearer. As a rule those tumors which develop from tissues which under usual conditions have active

function are the most dangerous. Such are tumors which arise from the surface cells of the body or from the glands.

Certain distinctive names have been applied to the different kinds of tumors, the names having reference to peculiarities of structure. The term cancer is one which is loosely used. For the pathologist it means a certain kind of malignant tumor which originates from epithelium. It is often used both by the laity and by the medical profession to designate a malignant tumor of any sort.

Tumors may appear at any time of life. Some are congenital, either existing at birth or making their appearance in a short time after birth. The incidence of these tumors does not extend beyond the age of five years. From five to fifteen is the period of greatest freedom from tumors. There is a gradual increase in their incidence to the age of forty, and from this to the age of fifty-five a very rapid increase. The more malignant tumors, the general class denoted as cancer, are more especially the disease of later life. There is some difference in the sexes with regard to the age relations. In females cancer is most common between the ages of forty-five and sixty-four, in males

most frequent from fifty-five to seventy-five. It is more frequent on the whole in females, but the percentage is not greatly in their favor. From English statistics it has been shown that taking individuals over thirty-five years of age the chances are that of males one in eleven will die of cancer, and of females one in eight. The returns of the registrar general of England show for 1906, out of a total of 141,241 deaths of males over thirty-five years of age, 12,695 died of cancer; and out of a total of 140,607 deaths of females over thirty-five years of age, 17,671 also died of cancer.

The distribution of tumors in all civilized lands seems to be about the same. There is a general belief, not based on any sure evidence, that tumors are relatively infrequent among uncivilized people. The difficulty here is the absence of any reliable disease statistics and the shorter average duration of life. All conditions which favor prolongation of life must increase the percentage of cancer, for the disease is one of later life. Nor can very much be gained from a study of the crude statistics which give the number of cancer deaths per 1000 living persons. Thus in European countries we have such variations as 0.11 in Serbia and 1.29 in

Switzerland of deaths per 1000 living, — variations which can be regarded as absurd. We might possibly conclude that Servia is a very bad place for residence, owing to the fact that so few reach the cancer age. The difference, however, is due to the greater accuracy of the vital statistics in the two countries. Where the mortality statistics are accurate and the causes of death carefully ascertained, there is a seemingly higher death-rate from cancer

It would be of great importance to know if cancer is on the increase, and if so to what degree. This would seem to be easy to determine, and yet it is difficult to correctly weigh all the factors which can influence the statistics on the subject. Taking the mortality statistics in Massachusetts, there is an ascent from 2.1 deaths per 10,000 in 1857 to 8.4 in 1905, representing an enormous increase in the forty-eight years. The curve formed by connecting the different years is a very gradual one, with no sharp rises. It is well known that in this period has been accumulated the knowledge which has enabled us to control in large measure the infectious diseases. The period of life when the infectious diseases are most prevalent is before the age of forty. The curve of

tuberculosis shows during the same period a fall from 39.5 cases per 10,000 in 1857 to 15.6 in 1905. Typhoid fever in the period from 1875 to 1905 shows a fall from 6.6 cases per 10,000 in 1875 to 2.8 in 1905. There has been great success in the prevention of the diseases of infancy and childhood. The appalling mortality under five years has been reduced from 34.79 in 1867 to 29.24 in 1903. Taking the actual figures of the census report we find that in Massachusetts the ratio of persons over forty years to the entire population has increased from 22 per cent in 1850 to 28.6 in 1905. There can be no doubt that the greatest factor in producing the increased mortality from cancer is the prolongation of life. Not only does cancer show this increase, but all other organic diseases, such as diseases of the heart and blood vessels, disease of the kidneys, &c. Another factor influencing the mortality is the greater accuracy of diagnosis, which increases the number of cases in which cancer, particularly in the internal organs, is recognized as a cause of death. Moreover, there is not the same attempt as formerly to conceal cases of cancer from the supposition that the family prestige would suffer from its presence being known. If

we take the general census report of 1890 and 1900, giving the number of deaths from cancer at the different ages, we find in the ten years an ascent from 16.2 per 10,000 of individuals from forty-five to sixty-four years to one hundred and ninety-four in 1900; while the mortality in individuals over sixty-five ascends from three hundred and fifty-two in 1890 to four hundred and fifty-three in 1900. These figures seem to show a definite increase, and if we analyze the causes of increase we find that it is due chiefly to cancer in internal organs. These figures deal alone with the deaths from cancer, and the better methods of treatment now used prevent, by curing them, a great number of cases from figuring in the mortality statistics. At least thirty per cent of the cases of cancer of the breast operated on by the best surgeons are cured, and even a larger percentage of cancers in other situations. It seems, however, after weighing all the facts, that there is an actual increase in the disease; that is, there are more cases at corresponding years.

In the matter of the heredity of the disease we meet with corresponding difficulties in reaching conclusions. There are no figures which will enable us to decide. The

disease is so enormously prevalent that few families escape it provided the progenitors attain the cancer age. So far as the study of disease in short-lived animals has been followed, although some very curious and interesting facts have been determined by hybridization, no facts justifying a belief that heredity is an important factor, or indeed plays any part, have been ascertained. In order to get reliable statistics as to heredity in man, the observations should extend for a number of generations and include a great many families. Data for such statistics are not at hand.

As to the cause of cancer we are very much in the dark. Cancers undoubtedly do arise in connection with certain antecedent unusual conditions which are apt to be looked upon as active causes. Thus they may arise after injuries, particularly injuries which are long continued in their action, but it is more probable that the injury calls into activity some underlying predisposition to the disease. Nor have we much warrant in regarding some undiscovered parasite as a cause. Cancer does not act as a parasitic disease; the active agent is not a parasite, but a cell of the body which in some way is excited to a growth which

ADDRESS BY PROFESSOR COUNCILMAN

has no limitation. Certain cancers undoubtedly arise from tissues which in the course of embryonic development have become separated from their normal relations, but this fact neither explains the growth nor can it apply to but a small class of tumors. What expectation is there that we may obtain in the future such knowledge of the disease that it may be controlled as are the infectious diseases? I think an expectation which the past justifies. Already the knowledge of the mode of growth and extension of the disease which has come from investigation has been applied to the surgical treatment. We know better now how the disease can be recognized in its very beginning. It is due to this knowledge that the surgeon now undertakes an operation in the early stages of the disease with the expectation of a definite cure. That in itself is a great advance. But there must be much more. We must ascertain just what change has taken place in the body of an individual with cancer which enables such an unlimited growth of cells to take place. In what way the tissues, the cells, the fluids, the nutrition, of such an individual differ from a normal individual. The problems presented are of general biological interest

and closely related to those of normal growth. There must be full opportunity given for the study of the disease in man, combined with the study of tumors in animals and the study of the very closely related processes in plants. Every resource of physiology, of chemistry, of pathology, must be brought to bear upon this problem. All the new methods of the study of the serum of the body which have given such important knowledge in regard to the immunity in infectious diseases must be used here. We stand here very much as we stood fifty years ago before the infectious diseases. In what light would he have been regarded who at that time foretold the control of tuberculosis and the annihilation of malaria and yellow fever? It was only by means of knowledge attained by the study of these diseases that the practical results were obtained. In the case of cancer we have a problem infinitely more difficult than any other problem of disease. We can frankly say at the outset that we do not know by what method of attack success is to be anticipated. The disease must be attacked by the same methods which have led to success in other fields. There must be opportunity; the complex problem must be broken up

into its simpler components, and these must be followed out.

In the plan which has been presented by Dr. Warren, there will not only be given opportunity for the study of the disease, but all the resources of science can be brought to bear on the treatment of the cases. There is great need for such an institution, for most hospitals refuse cases of the disease which seem to have passed the stage of operation. This alone—the care and treatment of cases—would justify the erection of a hospital devoted to the disease. If in addition the hospital can serve to give opportunities for the study of a disease in which there is such lack of knowledge, the benefit to humanity will be all the greater. It must be remembered further that the disease cancer is one in which we have an intense personal interest. We cannot fly from it, cannot avoid it, as we can certain other diseases. We are in the position of soldiers exposed to a very deadly fire, and the most dangerous battery against us is the one which gives out not death alone, but a lingering death with pain.

REMARKS OF FREDERICK P. FISH, ESQ.

MR. CHAIRMAN, LADIES AND GENTLEMEN: We have had the privilege of listening to two worthy representatives of what seems to me the noblest of the professions, who have informed us as to the present situation of the Cancer Investigation. We all must have appreciated, from what they said, the spirit that underlies their work. It is a spirit having two aspects, each a definite aspiration with which we must all sympathize, both medical men and laity. The first is modern—the scientific spirit of to-day—the demand for accurate investigation, for careful study, for analysis, for putting together all the known facts of experimentation, that this problem may be solved. While there have been scientific men, for generations before Aristotle and for many generations since, it is only in our day, and almost in our lifetime, that this scientific method has been absolutely recognized and applied, in medicine, or generally in the affairs of life. The other phase of the spirit of their work is one that has always existed to some extent, and that is the general regard for the welfare and the interest of the community. These physicians, in their study of cancer, in their work upon the other med-

ical problems in which they have been so successful, as in their daily work in their profession, have shown qualities, it seems to me, like those characterizing the best of the mediaeval saints and knights-errant of the olden time. These two aspirations—to accomplish results by scientific methods and in the interest of science, and to benefit the human race—are at the basis of their work. Now outside of their work, in all the regular material affairs of life, the first of these, that is, the scientific method,—careful painstaking investigation, analysis and synthesis, exact observation, clearness and accuracy of judgment,—has resulted in great things in our time. It is largely because of such definite and precise scientific effort that the cost of production has been so greatly reduced and that wealth undreamed of in any stage of the history of the world has come to us of to-day. It is only a fair reciprocity that this wealth, which is due to the scientific work which characterizes our time, should be appropriated to an adequate extent to support the scientific aspirations and scientific effort on the part of men who are working for us in this field of research. And, of course, there is not one of us who does not recognize the absolute necessity

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in our daily lives of the other phase of the spirit of this cancer investigation, that is, that we must show our warm friendship for humanity by making it possible that they who have the purpose to work for the general good and to accomplish results for the benefit of the human race—with their science and their desire to benefit our kind—should be supported by us out of the proceeds of the scientific spirit of the day in so far as a portion of such proceeds have come to us. The same desire to accomplish great results in helping our fellows which actuates these workers in the field of medical research should inspire us to give them needed help. We are all called upon, from day to day, from week to week, to aid in many matters of general interest, many of them important. It sometimes seems to me that we do not exercise discrimination enough in dealing with such demands. There is hardly a visionary idea or a half-intelligible thought that looks toward the welfare of the human race as a whole, or toward the well-being of individuals, that does not to-day form the basis for an association, for an organization, and for an appeal for funds. We all know that. I regret to say that it does not seem to me that these appeals,

of which we have so many, are carried far enough in the community. I have always thought that there are large numbers of our people, who desire to help in these matters if they can, who are never reached, are never approached, who are not able to do what they would like to do, and to give what they would like to give, because they have no opportunity. And it seems to me that in all matters of this sort we should try to get at these people.

But there are many of us who are approached in such matters constantly and whose resources are absolutely strained by such incessant appeals. And it seems to me that we must learn to discriminate, to find out what there is to which we should give our support and what there is to which we must say "No," with regret.

I do not know of anything which should more thoroughly interest us, which should seem to us more worthy of strong support, than this well-organized, scientific effort to control this disease,—this cancer,—one of the most malicious and malevolent of all that attack human life. It comes like a murderer in the night, like a venomous serpent, striking suddenly, and especially launching its deadly blows at those who are

in good health and who might well have before them years of satisfaction, years in which they would bring comfort and aid and help to those who are about them. It does not kill quickly, as does the murderer or the serpent. The victims live a life of pain and agony, with hope crushed into despair on their own part and on the part of their friends and family. And it seems to me that this particular disease of all others most "loves a shining mark." I do not doubt that there are people in this room, perhaps many, who have seen in their innermost circle of friends, in their own family, instances where men, and even more often women, in the prime of life, with years of happiness ahead of them, with every prospect of health and long life, with the greatest capacity for giving aid and comfort to others, have been stricken down, not mercifully at once, but with the long period of agony that follows the disease, before the end comes. I cannot help feeling that we should regard this effort to master the horrors of this scourge as almost of more importance than any other good cause of the many which we should like to help. It is of pressing individual importance for every one of us.

REMARKS OF FREDERICK P. FISH

I firmly believe we are near the end of the investigation, and near the dawning of great results. I have no expert knowledge on the subject and cannot speak as an expert; but I have had some experience in following scientific investigation generally, and I firmly believe these great physicians have now laid the foundations of success; they have determined the lines upon which to work, the lines upon which not to work; and what they need now—and their need is great beyond expression—is the opportunity to deal definitely and directly, in practice, with the disease as it appears in the human frame, the opportunity to study and apply what they have learned and will learn from day to day as the work goes on. I sincerely hope that Boston will in this matter, as it has in so many others, do its full duty. Let us do our part by giving this trained corps of experts who know the work, who know what they need, to whose readiness for self-sacrifice there is no limit, exactly what is requisite in order that they may accomplish this result which is so important to all of us individually and to our race.

REMARKS OF PRESIDENT ELIOT

LADIES AND GENTLEMEN: I suppose we all know that cancer is the most horrible disease which afflicts humanity, with one exception. On that exception it has been the policy of this community to observe an absolute silence.

Now, the terrible nature of the disease being clearly in our minds, what is there to encourage us to hope that science is going to find a remedy? The basis of hope is the wonderful series of conquests over formidable diseases which has been achieved during the nineteenth century and the few years of the twentieth. The conquest of diseases by the progress of medical science and research is one of the most extraordinary phenomena of the nineteenth century. When we look back to Jenner's discovery, vaccination against smallpox, we see the starting-point of a wonderful series of rapid and effectual discoveries in preventive and curative medicine, preventing the spread of formidable diseases, and curing formidable diseases. That is the blessed encouragement we feel to expect the successful discovery of means of prevention and of cure for cancer. Now that hope is strong, firm, assured. Without such hope we should

hardly be justified in urging the free expenditure of money in the pursuit of defence against cancer. With that hope we are fully justified in urging a liberal expenditure in the continuous search for the means of preventing and curing this formidable disease.

Among all the benevolent or philanthropic measures of to-day a distinction is to be observed, to which I wish to call attention in this case. As Mr. Fish has said, a multitude of good objects for the expenditure of private money in the hope of great public advantage is presented to public-spirited people in these days. We can, however, classify these efforts into two groups. The first group contains the efforts to palliate suffering, visible, evident, plainly before us, the efforts for the alleviation of miseries, sufferings, diseases in individuals. The Christian Church has almost from the beginning exerted itself strongly in this direction, not always wisely, but it has exerted itself for the palliation of misery established and visible. The second group of philanthropic efforts are palliative in part, but they are something better,—they are efforts to build defences, to contrive and put into execution preventive measures and remedies.

This second group I may call constructive measures. They resemble the educational effort, which is largely constructive in its nature, building up mental capacity and moral character as means of efficiency, as means of protection against evil.

Now, this particular effort to which our attention is called by Dr. Warren and his associates this afternoon is both palliative and constructive,—palliative for the patients to be treated in this hospital—peculiarly unfortunate people, because there are so few refuges for such sufferers; but much more than palliative, for this effort is constructive: it aims to build up medical research and to bring it to an issue of defence, prevention, and cure. That is great construction. That is what has been going on in medical research for more than one hundred years, with extraordinary success. And here is a new effort in a direction much needed—desperately needed, I may say, by the human race.

I do not know how any call could be clearer or more ringing to a good man or woman of means. I do not know how any proposal could be made to stir more vividly hope, faith, confidence, in a happy issue. How happy would that issue be! Cancer

REMARKS OF PRESIDENT ELIOT

is a disease which invades, or may invade, every class, every family. It makes no distinction between rich and poor, between educated and uneducated, between the fortunate and the unfortunate. It is everywhere. It arrives suddenly. It is one of the greatest miseries to which mankind is subject. The plan which Dr. Warren and his associates have put before us is practical. It is wise, well conceived, and full of hope; and if rewarded with success, what a blessing will its promoters have brought into the world!

